County: Trempealeau STRUM NURSING HOME

208 ELM	STREET,	P.O.	BOX	9
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STRUM	54770	Phone: (715) 695-2611		Ownership:	Corporation
Operated from 1/1	To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunc	tion with H	ospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set	Up and Sta	ffed (12/31/03):	50	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed	Capacity (	12/31/03):	50	Title 19 (Medicaid) Certified?	Yes
Number of Resident	s on 12/31/	03:	36	Average Daily Census:	38

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No   No	Primary Diagnosis		Age Groups	ફ ફ		27.8 41.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.6	More Than 4 Years	25.0
Day Services Respite Care	No Yes	Mental Illness (Org./Psy)   Mental Illness (Other)		65 - 74   75 - 84	2.8 30.6	•	94.4
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	55.6	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.6	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0	1		Nursing Staff per 100 Res	idents
Home Delivered Meals	Yes	Fractures	2.8	1	100.0	(12/31/03)	
Other Meals	No	Cardiovascular	0.0	65 & Over	94.4		
Transportation	No	Cerebrovascular	11.1			RNs	8.9
Referral Service	No	Diabetes	0.0	Gender	용	LPNs	7.3
Other Services	No	Respiratory	8.3			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	16.7	Male	33.3	Aides, & Orderlies	44.6
Mentally Ill	No			Female	66.7		
Provide Day Programming for			100.0				
Developmentally Disabled	No			1	100.0	[	
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## Method of Reimbursement

		Medicare			Medicaid Sitle 19			Other			Private Pay			amily Care			anaged Care	l 		
Level of Care	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	Ŷ	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	3.8	142	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.8
Skilled Care	1	100.0	332	23	88.5	122	0	0.0	0	9	100.0	119	0	0.0	0	0	0.0	0	33	91.7
Intermediate				2	7.7	101	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	5.6
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		26	100.0		0	0.0		9	100.0		0	0.0		0	0.0		36	100.0

Admissions, Discharges, and	I	Percent Distributior	n of Residents'	Condit	ions, Services, an	d Activities as of 12,	/31/03
Deaths During Reporting Period	I				0. 27. 11		
Percent Admissions from:		Activities of	96		% Needing sistance of	° ma+all	Total
	1		ŭ			<del>-</del>	Number of
Private Home/No Home Health			-	One	Or Two Staff	- <u>+</u>	Residents
Private Home/With Home Health		2	2.8		88.9	8.3	36
Other Nursing Homes	8.0	2	19.4		72.2	8.3	36
Acute Care Hospitals	56.0	Transferring				11.1	36
Psych. HospMR/DD Facilities	4.0	Toilet Use	36.1		55.6	8.3	36
Rehabilitation Hospitals	0.0	Eating	80.6		16.7	2.8	36
Other Locations	0.0	*******	******	****	*****	******	*****
Cotal Number of Admissions	25	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Exterr	nal Catheter	2.8	Receiving Resp	iratory Care	11.1
Private Home/No Home Health	7.4	Occ/Freq. Incontiner	nt of Bladder	50.0	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	37.0	Occ/Freq. Incontiner	nt of Bowel	27.8	Receiving Suct	ioning	0.0
Other Nursing Homes	3.7				Receiving Osto	my Care	0.0
Acute Care Hospitals	0.0	Mobility			Receiving Tube	Feeding	2.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	2.8	Receiving Mech	anically Altered Diets	13.9
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	51.9	With Pressure Sores		5.6	Have Advance D	irectives	97.2
otal Number of Discharges	1	With Rashes		5.6	Medications		
(Including Deaths)	27 j				Receiving Psvo	hoactive Drugs	55.6

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	૪	Ratio	%	Ratio	%	Ratio	8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76.0	80.8	0.94	83.7	0.91	84.0	0.90	87.4	0.87
Current Residents from In-County	88.9	73.7	1.21	72.8	1.22	76.2	1.17	76.7	1.16
Admissions from In-County, Still Residing	40.0	19.8	2.03	22.7	1.76	22.2	1.80	19.6	2.04
Admissions/Average Daily Census	65.8	137.9	0.48	113.6	0.58	122.3	0.54	141.3	0.47
Discharges/Average Daily Census	71.1	138.0	0.51	115.9	0.61	124.3	0.57	142.5	0.50
Discharges To Private Residence/Average Daily Census	31.6	62.1	0.51	48.0	0.66	53.4	0.59	61.6	0.51
Residents Receiving Skilled Care	94.4	94.4	1.00	94.7	1.00	94.8	1.00	88.1	1.07
Residents Aged 65 and Older	94.4	94.8	1.00	93.1	1.01	93.5	1.01	87.8	1.08
Title 19 (Medicaid) Funded Residents	72.2	72.0	1.00	67.2	1.07	69.5	1.04	65.9	1.10
Private Pay Funded Residents	25.0	17.7	1.41	21.5	1.16	19.4	1.29	21.0	1.19
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	0.6	0.00	6.5	0.00
Mentally Ill Residents	61.1	31.0	1.97	39.1	1.56	36.5	1.67	33.6	1.82
General Medical Service Residents	16.7	20.9	0.80	17.2	0.97	18.8	0.89	20.6	0.81
Impaired ADL (Mean)	36.1	45.3	0.80	46.1	0.78	46.9	0.77	49.4	0.73
Psychological Problems	55.6	56.0	0.99	58.7	0.95	58.4	0.95	57.4	0.97
Nursing Care Required (Mean)	4.9	7.2	0.67	6.7	0.72	7.2	0.68	7.3	0.66